



028 1630

PTO/SB/21 (02-04)  
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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

4

Application Number

09/003,047

Filing Date

January 5, 1998

First Named Inventor

Albert J.J. VAN OUYEN

Art Unit

1638

Examiner Name

D. H. Kruse

Attorney Docket Number

261922003302

## ENCLOSURES (Check all that apply)

☐ Fee Transmittal Form

☐ Fee Attached

☐ Amendment/Reply

☐ After Final

☐ Affidavits/declaration(s)

☐ Extension of Time Request

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority Document(s)

☐ Response to Missing Parts/Incomplete Application

☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a Provisional Application

☐ Power of Attorney, Revocation Change of Correspondence Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s) \_\_\_\_\_

☐ After Allowance communication to Technology Center (TC)

☐ Appeal Communication to Board of Appeals and Interferences

☐ Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☒ Other Enclosure(s) (please identify below):

Request to Withdrawal as Attorney or Agent and Change of Correspondence Address (1 page, plus 2 copies)

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Remarks

Customer No. 25225

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name

MORRISON & FOERSTER LLP  
Kate H. Murashige - 29,959

Signature

*Kate H. Murashige*

Date

August 13, 2004

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: August 13, 2004

Signature:

*Matthew Russell*

(Matthew Russell)



PTO/SB/83 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	09/003,047
	Filing Date	January 5, 1998
	First Named Inventor	Albert J.J. VAN OOYEN
	Art Unit	1638
	Examiner Name	D. H. Kruse
	Attorney Docket Number	261922003302

Commissioner for Patents  
To: P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.  
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
☒ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

This withdrawal is being made at the request of the applicant.

### CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.  
2. ☒ Change the correspondence address and direct all future correspondence to:

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☒ Firm or Individual Name

Address	3054 Cornwallis Road				
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Country	United States				
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Name	Kate H. Murashige				
Signature	<i>Kate H. Murashige</i>			Registration No.	29,959
Date	August 13, 2004			Telephone No.	(858) 720-5112

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.